# Application Data Sh t

#### **Application Information**

Application number:: Unassigned

Filing Date:: Herewith

Application Type:: Regular

Subject Matter:: Utility

Title:: METHODS AND DEVICES FOR ABLATION

Attorney Docket Number:: 003-007-C4

Request for Early Publication:: No

Request for Non-Publication:: No

Total Drawing Sheets:: 64

Small Entity?:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John

Middle Name:: W.

Family Name:: Sliwa

City of Residence:: Los Altos

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 897 Madonna Way

City of Mailing Address:: Los Altos

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94025

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Jonathan

Middle Name:: L.

Family Name:: Podmore

City of Residence:: Millbrae

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 177 Broadway Avenue

City of Mailing Address:: Millbrae

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94030

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Roxanne

Middle Name:: L.

Family Name:: Richman

City of Residence:: Los Gatos

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 588 Vasona Avenue #A

City of Mailing Address:: Los Gatos

State or Province of mailing address:: CA

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Country of mailing address:: US

Postal or Zip Code of mailing address:: 95032

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Scott

Middle Name:: C.

Family Name:: Anderson

City of Residence:: Sunnyvale

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 548 Cashmere Court

City of Mailing Address:: Sunnyvale

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94087

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FR

Status:: Full Capacity

Given Name:: Gerard

Family Name:: Champsaur

City of Residence:: Palo Alto

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1302 Channing Avenue

City of Mailing Address:: Palo Alto

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94301

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John

Middle Name:: E.

Family Name:: Crowe

City of Residence:: Palo Alto

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1601 Mariposa Blvd.

City of Mailing Address:: Palo Alto

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94306

### **Correspondence Information**

Name:: HOEKENDIJK & LYNCH, LLP

Street of mailing address:: P.O. Box 4787

City of mailing address:: Burlingame

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94011-4787

### Representative Information

Representative Designation:: Representative Number:: Representative Name::

Primary 37,149 Jens E. Hoekendijk

### **Domestic Priority Information**

Application:: Parent Filing Date::

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This Application	Continuation	09/884,435	06/19/01
Which is	Continuation-in-Part	09/614,991	07/12/00
Which is	Continuation-in-Part	09/507,336	02/18/00
Which is	Continuation-in-Part	09/356,476	07/19/99
Which is	Continuation-in-Part	09/157,824	09/21/98
Which is	Continuation-in-Part	08/943,683	10/15/97
Which is	Continuation-in-Part	08/735,036	10/22/96

## **Assignee Information**

Assignee Name::	Epicor, Inc.